

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Planned Parenthood Votes

ADDRESS (number and street)

434 West 33rd Street

☐ Check if different than previously reported. (ACC)

New York

NY

10001

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00489799

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☒ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

06

D D D /

01

Y Y Y Y Y Y

2014

through

M M M /

06

D D D /

30

Y Y Y Y Y Y

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Aaron Samulcek

Signature of Treasurer

Aaron Samulcek

[Electronically Filed]

Date

M M M /

07

D D D /

17

Y Y Y Y Y Y

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Planned Parenthood Votes

Report Covering the Period: From: MM / DD / YYYY 06 / 01 / 2014 To: MM / DD / YYYY 06 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, YYYY 2014		367024.11
(b) Cash on Hand at Beginning of Reporting Period.....	1006063.13	
(c) Total Receipts (from Line 19)	290599.44	1227519.33
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1296662.57	1594543.44
7. Total Disbursements (from Line 31)	232443.93	530324.80
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1064218.64	1064218.64
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	18274.97	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Planned Parenthood Votes

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
06		01		2014

To:

M M	/	D D	/	Y Y Y Y
06		30		2014

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

290003.12

1224823.01

(ii) Unitemized

596.32

696.32

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

290599.44

1225519.33

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

2000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

290599.44

1227519.33

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

290599.44

1227519.33

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

290599.44

1227519.33

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	49999.54	146054.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	49999.54	146054.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	83684.91	84434.91
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	98759.48	299835.14
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	232443.93	530324.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	232443.93	530324.80

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	290599.44	1227519.33
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	290599.44	1227519.33
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	49999.54	146054.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	49999.54	146054.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Marcia A Angle M.D.

Mailing Address 221 Deer Chase Lane

City State Zip Code
Durham NC 27705

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self - Employed

Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 17 / 2014

Transaction ID : A2014-1539476

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. D. Elwood Clinard Jr.

Mailing Address 3410 Healy Drive #202

City State Zip Code
Winston-Salem NC 27103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self - Employed

Inventor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 02 / 2014

Transaction ID : A2014-1539470

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

c. Sydney M Coffin

Mailing Address 1055 Ardsley Road

City State Zip Code
Charlotte NC 28207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 17 / 2014

Transaction ID : A2014-1539481

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10250.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI
Transaction ID :

Please note that our committee follows all federal regulations, including those found at 11 CFR 104.7(a) governing the solicitation of contributors. This committee specifically requests all pertinent information from contributors, including employer and occupation; informs contributors that the committee is required by law to report the same; and, makes a follow-up request for omitted information when necessary. The committee thus complies with the best efforts rules.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Sally S Cone

Mailing Address 500 Country Club Drive

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

06 / 03 / 2014

Transaction ID : A2014-1539471

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Gabrielle Culpepper

Mailing Address 2820 Saint Andrews Lane

City Charlotte State NC Zip Code 28205

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 03 / 2014

Transaction ID : A2014-1539477

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Abigail Disney

Mailing Address 15 E 26th Street #16B

City New York State NY Zip Code 10010

FEC ID number of contributing federal political committee.

C

Name of Employer

Self - Employed

Occupation

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

06 / 19 / 2014

Transaction ID : A2014-1538820

Amount of Each Receipt this Period

150000.00

SUBTOTAL of Receipts This Page (optional)..... ►

155500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. E. M. Gabel

Mailing Address 49 Forest Avenue

City
Delaware

State Zip Code
OH 43015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self - Employed

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

06 / 16 / 2014

Transaction ID : A2014-1539462

Amount of Each Receipt this Period

25000.00

Full Name (Last, First, Middle Initial)

B. Dr. Wendy Greene

Mailing Address 102 Hunters Ridge Road

City
Chapel Hill

State Zip Code
NC 27517

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

06 / 17 / 2014

Transaction ID : A2014-1539469

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

C. Ms. Robin T Hadley

Mailing Address 55 Flower Hill Road

City
Huntington Bay

State Zip Code
NY 11743

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

06 / 09 / 2014

Transaction ID : A2014-1539463

Amount of Each Receipt this Period

20000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Dr. John Hammond

Mailing Address 144 Essex Drive

City

Chapel Hill

State

NC

Zip Code

27514

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY
06 / 17 / 2014

Transaction ID : A2014-1539467

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

B. Ms. Virginia M Knapp

Mailing Address 1305 Little Harbour Lane

City

Vero Beach

State

FL

Zip Code

32963

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self - Employed

Occupation

Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
06 / 17 / 2014

Transaction ID : A2014-1539473

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. William E Little Jr.

Mailing Address 1107 Fifth Avenue, #3-N

City

New York

State

NY

Zip Code

10128

FEC ID number of contributing
federal political committee.

C

Name of Employer

George Little Management

Occupation

Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY
06 / 09 / 2014

Transaction ID : A2014-1539466

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Ms. Margaret Loeb

Mailing Address 15 Central Park West, PH 39

City
New York

State
NY

Zip Code
10023-7719

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2014

Transaction ID : A2014-1539468

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

B. Peter Meehan

Mailing Address 50202 Manly Drive

City
Chapel Hill

State
NC

Zip Code
27517

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2014

Transaction ID : A2014-1539474

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Prue Meehan

Mailing Address 50202 Manly Drive

City
Chapel Hill

State
NC

Zip Code
27517

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
06 / 30 / 2014

Transaction ID : A2014-1539475

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Katie Oates

Mailing Address 1020 Isleworth Avenue

City State Zip Code
 Charlotte NC 28203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self - Employed

Singer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
 06 / 17 / 2014

Transaction ID : A2014-1539479

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Anna Quindlen

Mailing Address 333 West 71st Street

City State Zip Code
 New York NY 10023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self - Employed

Media

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
 06 / 19 / 2014

Transaction ID : A2014-1539472

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Jennifer W Roberts

Mailing Address 619 Clement Avenue

City State Zip Code
 Charlotte NC 28204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

None

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
 06 / 17 / 2014

Transaction ID : A2014-1539480

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Ms. Sarah Stoesz

Mailing Address 582 Prairie Center Dr

City State Zip Code
 Eden Prairie MN 55344

FEC ID number of contributing
federal political committee.

C

Name of Employer
 PP Minnesota North Dakota South Dakota

Occupation
 President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
 06 / 27 / 2014

Transaction ID : A2014-1539478

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Dr. Amy Tiemann

Mailing Address 125 Graylyn Drive

City State Zip Code
 Chapel Hill NC 27516

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Spark Productions

Occupation
 Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

MM / DD / YYYY
 06 / 17 / 2014

Transaction ID : A2014-1539465

Amount of Each Receipt this Period

12500.00

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
 New York NY 10001

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Planned Parenthood Action Fund

Occupation
 N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

28823.01

Date of Receipt

MM / DD / YYYY
 06 / 30 / 2014

Transaction ID : A2014-1540208

Amount of Each Receipt this Period

5753.12

In-kind contribution: staff time for accounting and FEC compliance

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

18753.12

290003.12

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Community Outreach Group LLC

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Payment for Independent Expenditures reported on Schedule E

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y
06 / 13 / 2014
Transaction ID : B507281

Amount of Each Disbursement this Period

73863.49

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Health Systems Action Fund

Mailing Address 100 South Boylan Ave.

City Raleigh State NC Zip Code 27603

Purpose of Disbursement
Advance payment for independent expenditures

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y
06 / 12 / 2014
Transaction ID : B507158

Amount of Each Disbursement this Period

65000.00

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Health Systems Action Fund

Mailing Address 100 South Boylan Ave.

City Raleigh State NC Zip Code 27603

Purpose of Disbursement
Independent Expenditure for Hagan

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y
06 / 12 / 2014
Transaction ID : B507176

Amount of Each Disbursement this Period

-3435.60

Draw down on advance to PPHS-AF reported on line 21b of this report. See Schedule E

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

61564.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Health Systems Action Fund

Mailing Address 100 South Boylan Ave.

City Raleigh	State NC	Zip Code 27603
-----------------	-------------	-------------------

Purpose of Disbursement
Independent Expenditure for Hagan

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		21		2014

Transaction ID : B507178

Amount of Each Disbursement this Period

-1472.40

Draw down on advance to PPHS-AF reported on line 21b of this report. See Schedule E

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Health Systems Action Fund

Mailing Address 100 South Boylan Ave.

City Raleigh	State NC	Zip Code 27603
-----------------	-------------	-------------------

Purpose of Disbursement
Independent Expenditure for Hagan

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		21		2014

Transaction ID : B507179

Amount of Each Disbursement this Period

-1963.20

Draw down on advance to PPHS-AF reported on line 21b of this report. See Schedule E

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Health Systems Action Fund

Mailing Address 100 South Boylan Ave.

City Raleigh	State NC	Zip Code 27603
-----------------	-------------	-------------------

Purpose of Disbursement
Independent Expenditure for Hagan

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		23		2014

Transaction ID : B507180

Amount of Each Disbursement this Period

-2944.80

Draw down on advance to PPHS-AF reported on line 21b of this report. See Schedule E

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-6380.40

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement	001 Category/ Type
In-kind contribution of travel expenses for PP PA PAC (non-federal PA PAC)	

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2014

Transaction ID : B498766

Amount of Each Disbursement this Period

-21.63

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement	001 Category/ Type
In-kind contribution of staff time in support of TX Victory Committee (non-federal TX PAC)	

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2014

Transaction ID : B507215

Amount of Each Disbursement this Period

-121.03

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement	001 Category/ Type
In-kind contribution of printing in support of Wendy Davis, Gov candidate in TX	

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2014

Transaction ID : B507221

Amount of Each Disbursement this Period

-26.77

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-169.43

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement In-kind contribution of staff time in support of Wendy Davis, Gov candidate in TX	001 Category/ Type
Candidate Name	

Office Sought:	Disbursement For: 2014
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
State: District:	Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		14		2014

Transaction ID : B507223

Amount of Each Disbursement this Period

-741.18

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement In-kind contribution of staff travel expenses in support of Wendy Davis, Gov candidate in TX	001 Category/ Type
Candidate Name	

Office Sought:	Disbursement For: 2014
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
State: District:	Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		14		2014

Transaction ID : B507227

Amount of Each Disbursement this Period

-660.36

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement In-kind contribution of staff time in support of L Van de Putte, Lt Gov candidate in TX	001 Category/ Type
Candidate Name	

Office Sought:	Disbursement For: 2014
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
State: District:	Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		14		2014

Transaction ID : B507239

Amount of Each Disbursement this Period

-129.35

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-1530.89

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff travel expenses in support of PP TX Votes PAC
(non-federal TX PAC)
Candidate Name

001

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y
06 14 2014
Transaction ID : B507244

Amount of Each Disbursement this Period

-188.58

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff time in support of PP TX Votes PAC (non-federal TX PAC)
Candidate Name

001

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y
06 14 2014
Transaction ID : B507246

Amount of Each Disbursement this Period

-6710.26

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff time in support of PP Pennsylvania PAC (non-federal PA PAC)
Candidate Name

001

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y
06 14 2014
Transaction ID : B507209

Amount of Each Disbursement this Period

-575.46

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-7474.30

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
 New York NY 10001

Purpose of Disbursement
 In-kind contribution of staff time in support of Travis County Dem Party (non-federal TX PAC)
 Candidate Name

001
 Category/
 Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
 Not Applicable

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
 06 25 2014

Transaction ID : B507253

Amount of Each Disbursement this Period

-242.07

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
 New York NY 10001

Purpose of Disbursement
 In-kind contrib of staff travel expenses in support of Travis County Dem Party (non-federal TX PAC)
 Candidate Name

001
 Category/
 Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
 Not Applicable

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
 06 25 2014

Transaction ID : B507256

Amount of Each Disbursement this Period

-140.00

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
 New York NY 10001

Purpose of Disbursement
 In-kind contribution of staff travel expenses in support of PP TX Votes PAC (non-federal TX PAC)
 Candidate Name

001
 Category/
 Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
 Not Applicable

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
 06 26 2014

Transaction ID : B507248

Amount of Each Disbursement this Period

-910.01

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

-1292.08

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
 New York NY 10001

Purpose of Disbursement
 In-kind contribution of staff travel expenses in support of Wendy Davis, Gov
 Candidate in TX
 Candidate Name

001
 Category/
 Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
 Not Applicable

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
 06 26 2014

Transaction ID : B507231

Amount of Each Disbursement this Period

-910.01

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
 New York NY 10001

Purpose of Disbursement
 In-kind contribution of staff time in support of PP Pennsylvania PAC (non-
 federal PAC)
 Candidate Name

001
 Category/
 Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
 Not Applicable

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
 06 28 2014

Transaction ID : B507212

Amount of Each Disbursement this Period

-1901.92

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
 New York NY 10001

Purpose of Disbursement
 In-kind contribution of staff time in support of Wendy Davis, Gov candidate in
 TX
 Candidate Name

001
 Category/
 Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
 Not Applicable

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
 06 28 2014

Transaction ID : B507234

Amount of Each Disbursement this Period

-1573.12

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

-4385.05

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff time in support of PP TX Votes PAC (non-federal TX PAC)
Candidate Name

001

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y
06 28 2014
Transaction ID : B507250

Amount of Each Disbursement this Period

-3985.76

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff time in support of L Van de Putte, Lt Gov
Candidate Name

001

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y
06 28 2014
Transaction ID : B507241

Amount of Each Disbursement this Period

-121.97

Draw down on advance to Action Fund reported on Line 21b of the June Monthly Report. See line 29

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund Inc.

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
Payment for debt originally reported on 2014 June Monthly Report. See Schedule D
Candidate Name

001

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y
06 30 2014
Transaction ID : B507160

Amount of Each Disbursement this Period

7389.36

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3281.63

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

Planned Parenthood Votes

A. Planned Parenthood Action Fund Inc.

MM / DD / YYYY

00:

4074.99

Disbursement For: 2014

☐ Primary ☐ General

☒ Other (specify) ▼

Not Applicable

[MEMO ITEM]

B. Planned Parenthood Action Fund Inc.

MM / DD / YYYY

00

5753.12

Disbursement For: 2014

☐ Primary ☐ General

☒ Other (specify) ▼

Not Applicable

C. Blackbaud Inc.

06 / 20 / 2014

00-

260.06

Disbursement For: 2014

☐ Primary ☐ General

☒ Other (specify) ▼

Not Applicable

TOTAL This Period (last page this line number only).....

6013.18

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Blackbaud Inc.

Mailing Address 2000 Daniel Island Drive

City Charleston State SC Zip Code 29492

Purpose of Disbursement
Credit card fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2014
Transaction ID : B507170

Amount of Each Disbursement this Period

130.16

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 27025

City Richmond State VA Zip Code 23261

Purpose of Disbursement
Merchant fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 02 / 2014
Transaction ID : B507171

Amount of Each Disbursement this Period

242.32

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

372.48

49999.54

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 42

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Maine Action Fund PAC

Mailing Address 443 Congress St, 3rd Floor

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Non-Federal PAC

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Transaction ID : B507173

Amount of Each Disbursement this Period

36500.00

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Maine Action Fund PAC

Mailing Address 443 Congress St, 3rd Floor

City	State	Zip Code
Portland	ME	04101

Purpose of Disbursement
Non-Federal PAC

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		12		2014

Transaction ID : B507174

Amount of Each Disbursement this Period

36500.00

Full Name (Last, First, Middle Initial)

C. Friends for Flores

Mailing Address 420 Nellis Blvd. Suite A3-87

City	State	Zip Code
Las Vegas	NV	89110

Purpose of Disbursement
Contribution to state candidate for Lt. Gov

Candidate Name

Lucy Flores

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NV District:

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Transaction ID : B497664

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

78000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 42

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Beehive Research

Mailing Address 617 Pickford Place NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement	011 Category/ Type
In-kind contribution of TX state research shared with TX Gov candidate Wendy Davis on 2/3 & 2/12/14	

Candidate Name

Wendy Davis

Office Sought:	House
	Senate
	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State: TX

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		05		2014

Transaction ID : B498731

Amount of Each Disbursement this Period

1800.00

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement	011 Category/ Type
In-kind contribution of travel expenses for PP PA PAC (non-federal PA PAC)	

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2014

Transaction ID : B498765

Amount of Each Disbursement this Period

21.63

See line 21b

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement	011 Category/ Type
In-kind contribution of staff time in support of TX Victory Committee (non-federal TX PAC)	

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		11		2014

Transaction ID : B507214

Amount of Each Disbursement this Period

121.03

See line 21b

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1942.66

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 42

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
In-kind contribution of printing in support of Wendy Davis, Gov candidate in
TX

Candidate Name

Wendy DavisOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	13	/	2014

Transaction ID : B507220

Amount of Each Disbursement this Period

26.77

See line 21b

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
In-kind contribution of staff time in support of Wendy Davis, Gov candidate in
TX

Candidate Name

Wendy DavisOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	14	/	2014

Transaction ID : B507222

Amount of Each Disbursement this Period

741.18

See line 21b

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
In-kind contribution of staff travel expenses in support of Wendy Davis, Gov
candidate in TX

Candidate Name

Wendy DavisOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	14	/	2014

Transaction ID : B507225

Amount of Each Disbursement this Period

660.36

See line 21b

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1428.31

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 42

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement

In-kind contribution of staff time in support of L Van de Putte, Lt Gov

Candidate Name
Candidate in TX**Leticia Van de Putte**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2014

Transaction ID : B507238

Amount of Each Disbursement this Period

129.35

See line 21b

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement

In-kind contribution of staff travel expenses in support of PP TX Votes PAC

Candidate Name
(non-federal TX PAC)

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District:

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2014

Transaction ID : B507242

Amount of Each Disbursement this Period

188.58

See line 21b

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement

In-kind contribution of staff time in support of PP TX Votes PAC (non-federal

Candidate Name
TX PAC)

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District:

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2014

Transaction ID : B507245

Amount of Each Disbursement this Period

6710.26

See line 21b

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7028.19

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 42

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement In-kind contribution of staff time in support of PP Pennsylvania PAC (non-federal PA PAC)	011 Category/ Type
Candidate Name	

Office Sought:	Disbursement For: 2014
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable
State: District:	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		14		2014

Transaction ID : B507208

Amount of Each Disbursement this Period

575.46

See line 21b

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement In-kind contribution of staff time in support of Travis County Dem Party (non-federal TX PAC)	011 Category/ Type
Candidate Name	

Office Sought:	Disbursement For: 2014
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable
State: District:	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		25		2014

Transaction ID : B507251

Amount of Each Disbursement this Period

242.07

See line 21b

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement In-kind contrib of staff travel expenses in support of Travis County Dem Party (non-federal TX PAC)	011 Category/ Type
Candidate Name	

Office Sought:	Disbursement For: 2014
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable
State: District:	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		25		2014

Transaction ID : B507255

Amount of Each Disbursement this Period

140.00

See line 21b

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

957.53

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 42

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement In-kind contribution of staff travel expenses in support of PP TX Votes PAC (non-federal TX PAC)	<input type="checkbox"/> 011
Candidate Name	Category/ Type

Office Sought:	Disbursement For: 2014
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
State: District:	Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		26		2014

Transaction ID : B507247

Amount of Each Disbursement this Period

910.01

See line 21b

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement In-kind contribution of staff travel expenses in support of Wendy Davis, Gov candidate in TX	<input type="checkbox"/> 011
Candidate Name	Category/ Type

Office Sought:	Disbursement For: 2014
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: TX District:	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		26		2014

Transaction ID : B507229

Amount of Each Disbursement this Period

910.01

See line 21b

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement In-kind contribution of staff time in support of PP Pennsylvania PAC (non- federal PA PAC)	<input type="checkbox"/> 011
Candidate Name	Category/ Type

Office Sought:	Disbursement For: 2014
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
State: District:	Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		28		2014

Transaction ID : B507210

Amount of Each Disbursement this Period

1901.92

See line 21b

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3721.94

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 42

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
In-kind contribution of staff time in support of Wendy Davis, Gov candidate in TX

Candidate Name

Wendy DavisOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		28		2014

Transaction ID : B507232

Amount of Each Disbursement this Period

1573.12

See line 21b

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
In-kind contribution of staff time in support of PP TX Votes PAC (non-federal TX PAC)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		28		2014

Transaction ID : B507249

Amount of Each Disbursement this Period

3985.76

See line 21b

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
In-kind contribution of staff time in support of L Van de Putte, Lt Gov candidate in TX

Candidate Name

Leticia Van de PutteOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		28		2014

Transaction ID : B507240

Amount of Each Disbursement this Period

121.97

See line 21b

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5680.85
98759.48

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 31 OF 42

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MackCrounse Group

Nature of Debt (Purpose):

Canvass literature

Mailing Address 2001 N. Beauregard St. Ste 420

City State

Alexandria

Zip Code

VA

22311

Outstanding Balance Beginning This Period

3950.00

Transaction ID : D439006

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3950.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Planned Parenthood Action Fund Inc.

Nature of Debt (Purpose):

Staff time for fundraising efforts and non-federal in-kind activity. See line 29 & Schedule E

Mailing Address 434 West 33rd Street

City State

New York

Zip Code

NY

10001

Outstanding Balance Beginning This Period

7394.78

Transaction ID : D539006

Amount Incurred This Period

5580.09

Payment This Period

7394.78

Outstanding Balance at Close of This Period

5580.09

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Sundberg & Associates, Inc.

Nature of Debt (Purpose):

Graphic design for fundraising and advocacy communications.

Mailing Address 9 East 45th Street

City

New York

State

NY

Zip Code

10017

Outstanding Balance Beginning This Period

900.00

Transaction ID : D739006

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

900.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

10430.09

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 32 OF 42

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

M&R Strategic Services, Inc.

Nature of Debt (Purpose):
Email consultant.

Mailing Address 1901 L Street NW Suite 800

City	State	Zip Code
Washington	DC	20036

Outstanding Balance Beginning This Period

137.52

Transaction ID : D739007

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

137.52

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Alliance Fm

Nature of Debt (Purpose):
Printing of brochure.

Mailing Address 133 Industrial Avenue

City	State	Zip Code
Hasbrouck Heights	NJ	07604

Outstanding Balance Beginning This Period

312.50

Transaction ID : D739008

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

312.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

FedEx

Nature of Debt (Purpose):
Shipping of invitations for fundraiser.

Mailing Address 326 7th Avenue

City	State	Zip Code
New York	NY	10001

Outstanding Balance Beginning This Period

21.04

Transaction ID : D739009

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

21.04

1) SUBTOTALS This Period This Page (optional)..... ►

471.06

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 33 OF 42

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

PPCNC Action Fund

Nature of Debt (Purpose):

Postage of invitations for fundraiser. See
Schedule E

Mailing Address PO Box 9194

City State

Zip Code

Chapel Hill

NC

27515

Outstanding Balance Beginning This Period

29.16

Transaction ID : D739010

Amount Incurred This Period

1.32

Payment This Period

0.00

Outstanding Balance at Close of This Period

30.48

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Christina Dupuy

Nature of Debt (Purpose):

Website communications.

Mailing Address 140 W. 70th St. #1G

City State

Zip Code

New York

NY

10023

Outstanding Balance Beginning This Period

833.34

Transaction ID : D739011

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

833.34

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

76 Words

Nature of Debt (Purpose):

Production of advertisement. See Schedule E

Mailing Address 1720 Eye Street NW, Ste 550

City
WashingtonState
DCZip Code
20006

Outstanding Balance Beginning This Period

0.00

Transaction ID : D739012

Amount Incurred This Period

1500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

1) SUBTOTALS This Period This Page (optional)..... ►

2363.82

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 34 OF 42

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blueprint Interactive

Nature of Debt (Purpose):

Production of advertisement. See Schedule E

Mailing Address 2229 North Pollard St

City State

Zip Code

Arlington

VA

22207

Outstanding Balance Beginning This Period

0.00

Transaction ID : D739013

Amount Incurred This Period

5010.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5010.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

5010.00

2) TOTALS This Period (last page this line number only)..... ►

18274.97

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

18274.97

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 35 OF 42
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M / D D / Y Y Y Y Y Y </div>	

Full Name of Payee PPCNC Action Fund [MEMO ITEM]		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;"> M M / D D / Y Y Y Y Y Y 06 / 05 / 2014 </div>	
Mailing Address PO Box 9194		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;"> 1.32 </div>	
City Chapel Hill	State NC	Zip Code 27515	Transaction ID : B498443 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;"> M M / D D / Y Y Y Y Y Y 06 / 05 / 2014 </div>
Purpose of Expenditure List rental and postage of invitations for fundraiser. See Schedule D		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;"> 004 </div>	
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;"> 2019.44 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____

Full Name of Payee Community Outreach Group LLC		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;"> M M / D D / Y Y Y Y Y Y 06 / 12 / 2014 </div>	
Mailing Address 1110 Vermont Ave N.W. #300		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;"> 25852.22 </div>	
City Washington	State DC	Zip Code 20005	Transaction ID : B498445 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;"> M M / D D / Y Y Y Y Y Y 06 / 13 / 2014 </div>
Purpose of Expenditure Volunteer recruitment phone banks. See line 21b		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;"> 004 </div>	
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;"> 31307.26 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;"> 25852.22 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Aletheia Henry

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 07 / 17 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 36 OF 42
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	
Full Name of Payee Planned Parenthood Health Systems Action Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 12 / 2014	
Mailing Address 100 South Boylan Ave.		Amount 3435.60	
City Raleigh	State NC	Zip Code 27603	Transaction ID : B498446
Purpose of Expenditure Volunteer recruitment phone banks. See line 21b		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 06 / 12 / 2014
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		31307.26	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee 76 Words [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 19 / 2014	
Mailing Address 1720 Eye Street NW, Ste 550		Amount 1500.00	
City Washington	State DC	Zip Code 20006	Transaction ID : B499103
Purpose of Expenditure Production of advertisement. See Schedule D		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 06 / 19 / 2014
Name of Federal Candidate Cory Gardner		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought		6510.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		3435.60	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Aletheia Henry</i>		Date MM / DD / YYYY 07 / 17 / 2017	
		[Electronically Filed]	

Full Name of Payee Planned Parenthood Action Fund Inc. [MEMO ITEM]		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>06 / 21 / 2014</div> </div>	
Mailing Address 434 West 33rd Street		Amount <div> <div>_____</div> <div>5.10</div> </div>	
City New York	State NY	Zip Code 10001	Transaction ID : B499187 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>06 / 21 / 2014</div> </div>
Purpose of Expenditure Printing		Category/ Type <div> <div>_____</div> <div>004</div> </div>	
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <div> <div>_____</div> <div>60600.18</div> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 38 OF 42
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	
Full Name of Payee Planned Parenthood Health Systems Action Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 21 / 2014	
Mailing Address 100 South Boylan Ave.		Amount 1472.40	
City Raleigh	State NC	Zip Code 27603	Transaction ID : B499180
Purpose of Expenditure Persuasion canvasses. See line 21b		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 06 / 12 / 2014
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		60600.18	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee Planned Parenthood Health Systems Action Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 21 / 2014	
Mailing Address 100 South Boylan Ave.		Amount 1963.20	
City Raleigh	State NC	Zip Code 27603	Transaction ID : B499181
Purpose of Expenditure Persuasion events. See line 21b		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 06 / 12 / 2014
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		60600.18	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		3435.60	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Aletheia Henry</i>		Date MM / DD / YYYY 07 / 17 / 2017	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 39 OF 42
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY					
Full Name of Payee Community Outreach Group LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 21 / 2014		
Mailing Address 1110 Vermont Ave N.W. #300			Amount 14772.70		
City Washington State DC Zip Code 20005		Transaction ID : B499184 Date of Disbursement or Obligation MM / DD / YYYY 06 / 13 / 2014			
Purpose of Expenditure Persuasion events. See line 21b		Category/Type 004			
Name of Federal Candidate Kay Hagan			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NC		
Calendar Year-To-Date Per Election for Office Sought 60600.18			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Community Outreach Group LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 21 / 2014		
Mailing Address 1110 Vermont Ave N.W. #300			Amount 11079.52		
City Washington State DC Zip Code 20005		Transaction ID : B499183 Date of Disbursement or Obligation MM / DD / YYYY 06 / 13 / 2014			
Purpose of Expenditure Persuasion canvasses. See line 21b		Category/Type 004			
Name of Federal Candidate Kay Hagan			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NC		
Calendar Year-To-Date Per Election for Office Sought 60600.18			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			25852.22		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Aletheia Henry</u> <div style="text-align: right;">[Electronically Filed]</div>			Date MM / DD / YYYY 07 / 17 / 2017		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 40 OF 42
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div> </div>	

Full Name of Payee Community Outreach Group LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 23 / 2014	
Mailing Address 1110 Vermont Ave N.W. #300		Amount 22159.05	
City Washington	State DC	Zip Code 20005	Transaction ID : B499185
Purpose of Expenditure Persuasion phone banks. See line 21b		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 06 / 13 / 2014
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Planned Parenthood Action Fund Inc. [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 23 / 2014	
Mailing Address 434 West 33rd Street		Amount 720.00	
City New York	State NY	Zip Code 10001	Transaction ID : B499186
Purpose of Expenditure Dialer minutes for persuasion phone banks		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 06 / 23 / 2014
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	22159.05
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Aletheia Henry

[Electronically Filed]

Date

 MM / DD / YYYY
07 / 17 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 41 OF 42
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY			
Full Name of Payee Planned Parenthood Health Systems Action Fund		Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 23 / 2014	
Mailing Address 100 South Boylan Ave.		Amount 2944.80	
City Raleigh	State NC	Zip Code 27603	Transaction ID : B499182
Purpose of Expenditure Persuasion phone banks. See line 21b		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 12 / 2014
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 86424.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Planned Parenthood Action Fund Inc. [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYYYY 06 / 28 / 2014	
Mailing Address 434 West 33rd Street		Amount 390.00	
City New York	State NY	Zip Code 10001	Transaction ID : B499859
Purpose of Expenditure List rental		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYYYY 06 / 28 / 2014
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 86814.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		2944.80	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Aletheia Henry</u>		Date MM / DD / YYYYYY 07 / 17 / 2017	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 42 OF 42
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Planned Parenthood Action Fund Inc. [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 28 / 2014	
Mailing Address 434 West 33rd Street		Amount 390.00	
City New York	State NY	Zip Code 10001	Transaction ID : B499886
Purpose of Expenditure List rental	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 06 / 28 / 2014	
Name of Federal Candidate Thom Tillis		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		390.00	

Full Name of Payee Planned Parenthood Action Fund Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2014	
Mailing Address 434 West 33rd Street		Amount 5.42	
City New York	State NY	Zip Code 10001	Transaction ID : B498442
Purpose of Expenditure Payment for Independent Expenditure originally reported on June Monthly Report. See Schedule D.	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 06 / 30 / 2014	
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		86819.45	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	5.42
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	83684.91

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Aletheia Henry

[Electronically Filed]

Date

MM / DD / YYYY
07 / 17 / 2017

Signature